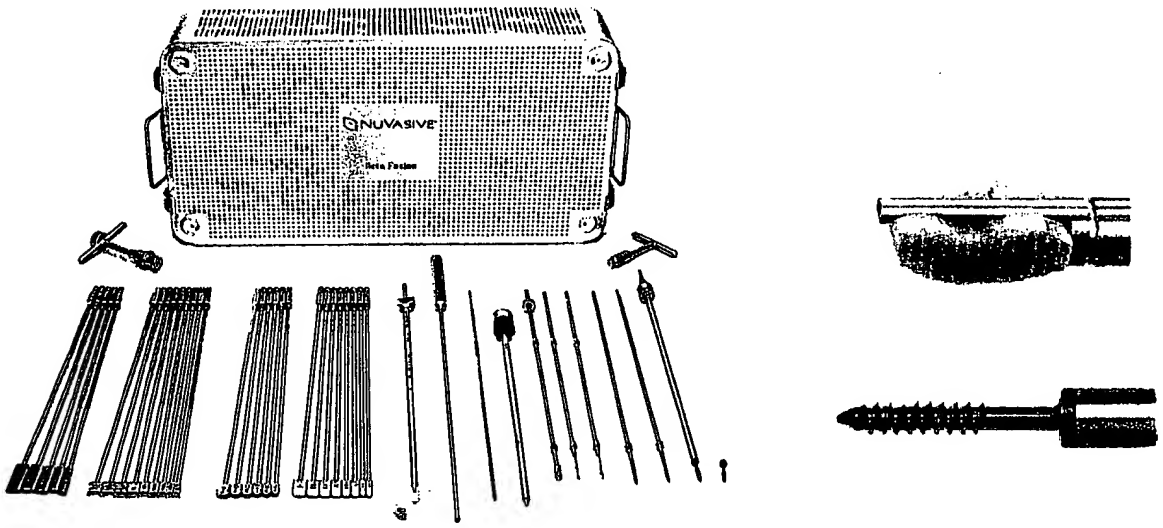
NUVASIVE™
Creative Spine Technology™

Triad™
Tri-Columnar Spinal EndoArthrodesis™ via Minimally Invasive Guidance

The first outpatient fusion construct, the Triad™ Spinal Fusion System utilizes the Minimally Invasive Guidance system and INS-1™ NeuroPhysiologic Guidance™ to perform a percutaneous, single-level anterior interbody fusion adjacent to the exiting nerve roots with posterior stabilization. The interbody fusion allograft is directed safely and reproducibly through the Vector™ F cannula for optimal placement. Percutaneous trans-facet screws complete the posterolateral fixation construct and stabilize the motion segment.



- The Triad Spinal Fusion System features the following:
  - First percutaneous outpatient fusion
  - Innovative posterolateral approach
  - Three column stability
  - Designed to maintain neuromuscular and musculoskeletal integrity
  - Biological interbody graft
  - Facet fixation
  - Reduced potential for adhesions and epidural scarring

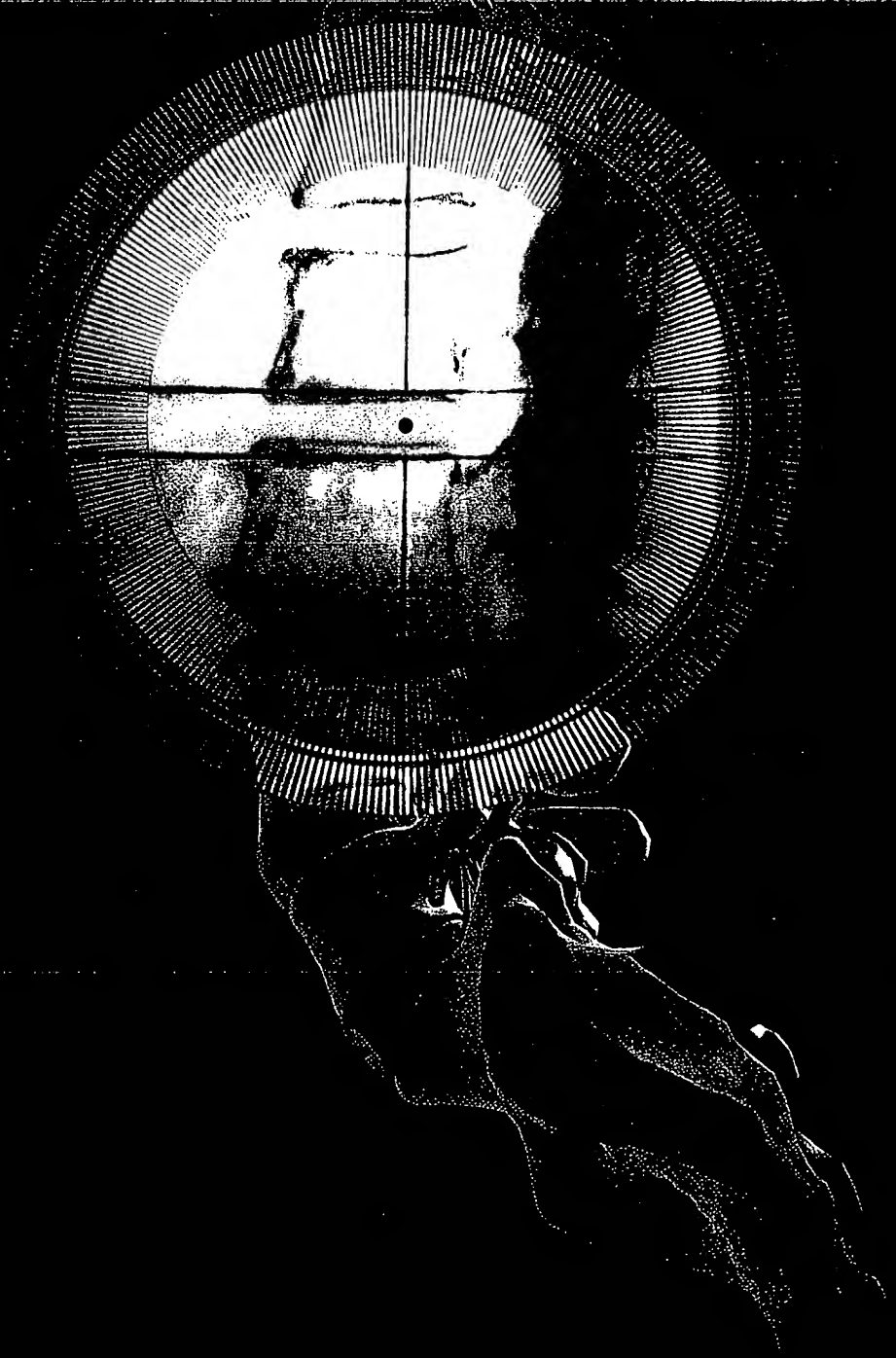
- Minimally Invasive Navigation enables:
  - Outpatient Endoscopic Spinal Fusion
  - Percutaneous Vertebral Body Access
  - Endoscopic Posterolateral Discectomy

Please see reverse for ordering information.

EXHIBIT
A

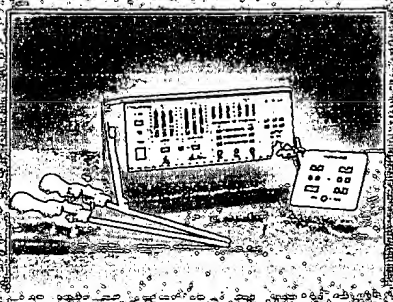
NuVasive

Safe, Reproducible Percutaneous Access To The Spine

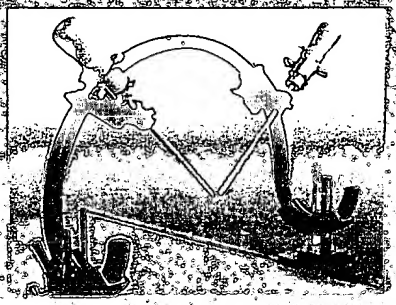


THE TOTAL TECHNOLOGY INTEGRATION

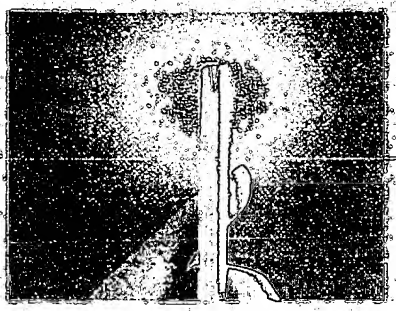
The NuVasive platform technology is indicated for the treatment of compressed nerves, degenerative disc disease and pathologic vertebral compression fractures. In its simplest terms, safe, reproducible discectomy, arthrodesis or vertebroplasty are achieved using a surgical guide frame, which, when aided by an image intensifier, ensures consistent instrument placement. Then, atraumatic expanding tip cannulae and real-time electrically-evoked EMG allow for objective nerve detection, status and surveillance, affording safe access to the disc space from a posterolateral approach. The components underlying this precisely integrated system include:



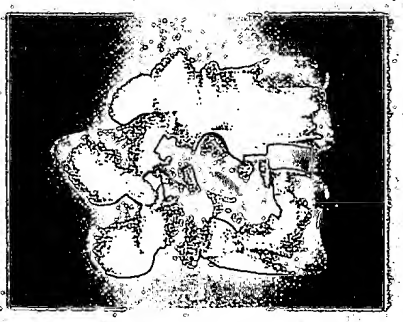
The INS-1™ Intraoperative Nerve Surveillance System provides easy-to-interpret nerve detection data and allows for continuous real-time nerve monitoring throughout posterolateral procedures while working in close proximity to the exiting nerve roots.



The SpineArc™ Surgical Navigator provides accurate and reproducible guidance and visualization for posterolateral access to various lumbar pathologies while reducing fluoroscopic radiation exposure. The guide frame is superimposed over the patient's spine and aligned with the surgical target (e.g., the operative disc plane) using radiodense indicators.



Specialized Cannulae, such as the Vector™ Expanding Tip Cannulae, enable atraumatic access to the spine through muscle-sparing blunt dissection. When guided by SpineArc and INS-1, Vector Cannulae provide safe, reproducible access to lumbar spine pathologies.



Triad™ Spinal EndoArthrodesis System for tri-columnar fusion and stability. Representing the first outpatient fusion construct, Triad uses SpineArc and INS-1 to perform a percutaneous, single-level anterior interbody fusion with posterior stabilization. A specially designed Vector F cannula safely directs the anterior interbody fusion allograft for optimal and reproducible placement.

OPTIMIZED FOR MAXIMUM BENEFIT

The patient is fully anesthetized and immobilized for total control of the operative field and maximum patient comfort.

Electrically active components of the percutaneous system generate real-time continuous EMG monitoring to provide an accurate, reliable indicator of nerve status, as well as detection of nerves relative to the surgical instruments. In percutaneous discectomy, objective nerve detection and monitoring replaces patients' reporting of nerve stimulus.

Accurate, reproducible alignment and targeting is achieved using the first application of rigid stereotaxis to the lumbar spine. The calibrated SpineArc guide frame is aligned with image intensifier registration to control the position and direction of the operative instruments and increase accuracy of instrument placement.

Blunt, atraumatic dissection using an expanding cannula reduces the risk of nerve injury, since a blunt and tapered instrument placed near or within Kambin's triangle is more likely to displace, rather than pin, a nerve. A proprietary radially expanding tip on the cannula also helps to displace nearby nerves and increase the operative area.

A biportal approach increases capacity for visualization, extraction of material and localization of instruments in the disc space. Added efficacy is achieved through use of a range of instruments that are comparable in size to those used during conventional procedures, such as discectomy and fusion.

Tri-columnar fusion and stability are achieved via a percutaneous posterolateral approach. Anterior interbody fusion is facilitated by precise placement of allograft tissue and fusing of facet joints using a trans-facet technique. This revolutionary technique may enable the first outpatient spinal fusions.

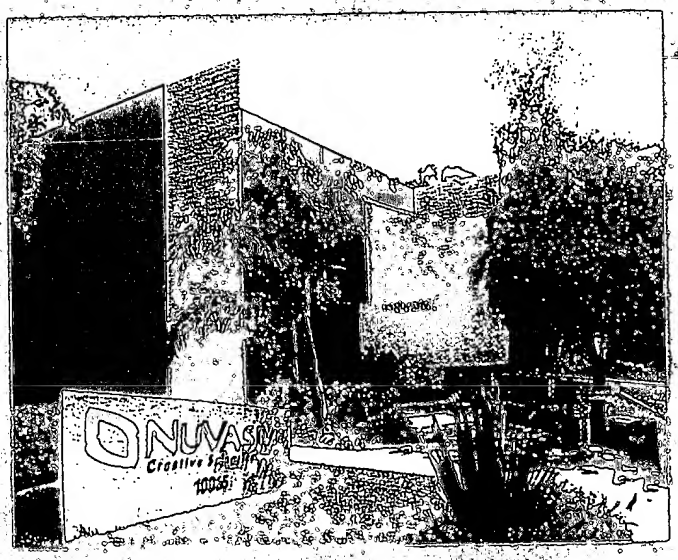
SEEING IS BELIEVING

We invite you to visit our state-of-the-art Operating Theatre in San Diego, California, for a hands-on demonstration. Guided by our specialized clinical education staff, you will be trained to use our integrated platform technology to perform safe, reproducible percutaneous procedures, including discectomy, fusion and vertebroplasty.

You will also have the opportunity to explore new technologies, such as image-guided surgical spine navigation, and to learn about future applications under development such as rapid disc removal.

We believe our systems approach warrants your evaluation. Multiple safety features have been incorporated to enhance access and minimize the risk of nerve injury. Our unique integrated technology platform with its "NeuroPhysiologic eyes" is designed for maximum safety and complete reproducibility.

We encourage you to invest the time and effort to learn the utility of our technologies and instruments to realize the benefits of the NuVasive NeuroPhysiologic Guidance system. What you and your patients stand to gain is the full potential of safe, reproducible percutaneous access to the spine: improved surgical outcomes, decreased epidural scarring, reduced operative time and hospital days, faster rehabilitation and reduced costs.



NUVASIVE™
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Triad™ Cortical Bone Allograft

An integral part of the Triad™ Spinal EndoArthrodesis™ System, the Triad Cortical Bone Allograft provides distraction and structural support for an anterior interbody fusion. Placed either in an open technique or percutaneously from a posterolateral approach through the Vector™ F fusion cannulae, the allografts, in conjunction with percutaneous facet fixation, complete the first outpatient fusion construct.

NuVasive Triad Cortical Bone Allografts are aseptically packaged in physiologic solutions, a novel, more convenient packaging method that will minimize graft preparation time and potential waste of bone resources. Aqueous packaging of bone allografts addresses deficiencies in the two commonly used allograft preservation methods: freezing and freeze-drying.*

- Triad Aqueous-Packaged Cortical Bone Allograft features the following:
  - *Implant-ready graft.*
    - No rehydration necessary.
    - No thawing necessary.
    - No freezer/refrigeration storage necessary.
    - Store on shelf at room temperature.**
  - Placed via an open procedure or percutaneously using NuVasive Vector F Cannulae and Triad EndoArthrodesis instruments.
  - Typical femoral cortical bone compression strength ~138 MPa

Please see reverse for ordering information.

THE SEARCH FOR SAFE ACCESS

The quest for minimally invasive surgical techniques for accessing the spine has always been a challenge. Despite resolute effort, early pioneers were unable to find ways to adequately visualize and control the surgical field. Patients were necessarily conscious and in obvious discomfort, and the percutaneous channels were too small to allow for complete nerve decompression, let alone attempting fusion.

To this day, 90% to 95% of spine surgeries are still "open" because comparable efficacy using less invasive procedures has not been achieved. And yet, the clinical need for safe, effective minimally invasive techniques is greater than ever as aging, active "baby boomers" seek more viable options for spine care.

NuVasive™ is dedicated to the development of innovative technology platforms that allow safe, reproducible access to the spine. Our vision is as powerful as the one that inspired early surgical pioneers. Only our way of "seeing" is totally unique.

We realized that clinical success would depend on a revolutionary approach. One that would put you — the surgeon — at the center of a dynamic R&D process to ensure rapid prototyping in response to your needs.

INNOVATION FROM AN ELEGANT INTEGRATION

Earlier percutaneous techniques typically focused on singular components. At NuVasive, we approached the challenge differently, taking a unique, innovative "systems approach" — one that integrates multiple components using a precise and reproducible methodology.

To minimize risk and the learning curve associated with new procedures, we went one step further with our proprietary platform technology and incorporated familiar, proven technologies, such as stereotaxis, electrically-elicited EMG and fluoroscopy.

The result is that, today, we have a posterolateral spinal guidance system for safely and reproducibly accessing and treating degenerative disc disease, spinal instability and vertebral fractures, including percutaneous discectomy, outpatient endoscopic spinal fusion and vertebral body access.

We believe our goal of doing for the spine what arthroscopy achieved for the larger joints two decades ago, is within reach, bringing with it benefits for surgeons and patients alike: decreased epidural scarring, reduced operative time, fewer days in hospital, faster rehabilitation and reduced costs.

NUVASIVE™
Creative Spine Technology™

Company Profile

NuVasive is focused on the design, development and commercialization of minimally invasive spinal guidance products for the treatment of degenerative disc disease, spinal fusion and osteoporotic fractures, including Endoscopic Discectomy, Outpatient Endoscopic Spinal Fusion and Percutaneous Vertebral Body Access.

The Company's initial products under development are designed to safely promote, facilitate and enhance minimally invasive guidance and access to the spine for the clinician and the patient. The Company's products are designed to be utilized in an outpatient setting, reducing costs and improving surgical outcomes. In addition, the Company's lead products, the INS-1™ and NeuroVision™ systems, are specifically designed to allow minimally invasive spinal guidance on a fully anesthetized patient.

NeuroPhysiologic Guidance™

The INS-1™ nerve surveillance system is designed to enable the spine surgeon to safely approach the lumbar spine with accurate, easily interpretable nerve proximity data. Continuous real-time nerve monitoring allows minimally invasive, posterolateral procedures adjacent to the exiting nerve roots that may significantly reduce postoperative morbidity, hospitalization and rehabilitation time.

SpineArc™ Surgical Navigator

As an integral part of the NuVasive Minimally Invasive Guidance System, the SpineArc™ Surgical Navigator provides accurate and reproducible guidance for posterolateral access to the spine. The SpineArc™ System enables triangulation, targeting, visualization and access channels to various lumbar pathologies while reducing fluoroscopic radiation exposure to the clinician and patient.

Vector™ Cannulae

Vector™ Expanding Tip Cannulae enable atraumatic access to the spine through muscle sparing blunt dissection. When combined with the SpineArc™ Surgical Navigator and the INS-1™ Intraoperative Nerve Surveillance System, Vector™ Cannulae are designed to provide a safe and verifiable approach to spinal pathologies. Vector™ Cannulae enable percutaneous posterolateral discectomy adjacent to the exiting nerve roots and further enable the first outpatient fusion with the integration of the Triad™ Spinal Fusion System, an anterior interbody fusion performed posterolaterally combined with posterior stabilization.

Triad™ Tri-Columnar Spinal EndoArthrodesis™ via Minimally Invasive Guidance

The first outpatient fusion construct, the Triad™ Spinal Fusion System utilizes the Minimally Invasive Guidance system and INS-1™ NeuroPhysiologic Guidance™ to perform a percutaneous, single-level anterior interbody fusion adjacent to the exiting nerve roots with posterior stabilization. The interbody fusion allograft is directed safely and reproducibly through the Vector™ F cannula for optimal placement. Percutaneous trans-facet screws complete the posterolateral fixation construct and stabilize the motion segment.

The Company has assembled a broad portfolio of surgical spine technologies that were internally developed and for which either patents have been issued or patent applications have been filed for use in the development of minimally invasive spine surgery products. The Company's portfolio includes numerous proprietary platforms in intra-operative nerve surveillance and nerve monitoring, surgical guide frames, access cannulae and fusion devices to be used in the Company's approach to facilitating and managing degenerative disc disease with endoscopic surgical methods.

The Company intends to focus on research and development of products while leveraging its technology through the establishment of product development, manufacturing and marketing collaborations with select spine device and biotechnology companies. The Company has a development and distribution agreement with Tissue Banks International for allograft tissue implants for spinal fusion. The Company has a strategic development and marketing collaboration with BrainLAB AG covering the integration of NuVasive's NeuroVision and BrainLAB's VectorVision™ products for real time, 3-D surgical spine guidance. The Company also has marketing collaboration with American OsteoMedics, Inc. The clinical application is focused on treating osteoporotic fractures of the vertebrae. For other projects, the Company intends to select development and/or commercialization partners after the Company has completed development with respect to each such product.

The market is quite large and dynamic with 450,000 discectomies and 275,000 spinal fusions estimated for 2000 in the US and roughly the same number of procedures performed internationally. Specifically in the underserved osteoporotic and compression spine fractures segment there are is an incidence of 700,000 fractures and approximately 275,000 are currently being treated. The overall spine market is projected at $1.4 billion worldwide with CAGR (compound annual growth rate) exceeding 20%. Furthermore, the spine segment of orthopaedics is the least price sensitive with estimated gross profits margins of 65-75%. Aging, active baby boomers demand better clinical options with decreased morbidities. However, the current "gold standard" spine surgery options are performed open and are quite invasive in nature.

The key elements of the Company's strategy are to: (i) develop a new paradigm for the treatment of degenerative disc diseases; (ii) maintain technological leadership by focusing resources exclusively on minimally invasive spine surgery; (iii) continue to expand, enhance and protect its proprietary technology, including methods of intra-operative nerve monitoring and the Company's fusion technologies; and (iv) leverage its technology through the establishment of strategic collaborations.

The Company's executive offices are located at 10065 Old Grove Road, San Diego, CA 92131, and its telephone number is (858) 271-7070.